## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>9-22-08</u>	Address:	306 N Railroad St
Case #:	22F43588		Wolcottville In 45795
County:	<u>Lagrange</u>		Detached Garage
Type of Laboratory Seizure (check one) Seizure Location (check all that apply)			
Operation Chemic Dumpsi	onal Lab al/Glassware/Equipment (only) ite (only)	☐ Residence ☑ Outbuilding ☐ Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other;
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)  Lithium/Ammonia Reaction(s): one-pot reactions			
Red Phosphorous/Iodine Reaction(s):			
☐ Flammable Solvents: Coleman /ether			
Water Reactive Metal (Lithium): Intact/casing/strippings			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s): 3 HCL generators			
Corrosive Acid: Rooto			
Corrosive Base: <u>Lye/ammonium sulfate</u>			
Other (item and location): filters/PSE/Salat			
Child under age 18 discovered (check one)  ☐ Yes (number present)  ☐ No  *If yes, fax report to Child Protective Services		Investigative Information ☐ Ephedrine/Pseudoephedrine Tracking Log ☐ Retail/Merchant Tip ☐ Other:Citizen	
This report is to be faxed to the following agencies that serve the location:			
Fire Departr	nent: Johnson Twp FD	Fax: 260-85	<u>54-3402</u>
Health Department: Lagrange Co		Fax: <u>260-49</u>	
Child Protec	ction Scryice;	Fax:	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Tpr. Rob Smith Phone 260-432-8661  ** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department			

listed within 24 hours of scene processing.

This form is to be included with the ease file, and a copy sent to the Clandestine Laboratory Team Leader for retention.